

This portion MUST be returned with your payment to ensure proper credit. THANK YOU ✓

| |
|--------------------------------|
| ACCOUNT BILLED |
| SHAMROCK MINING ASSOCIATES LLC |

| |
|-------------------|
| PROJECT NAME |
| BLIND STREAM 5-11 |

| |
|------------|
| PROJECT ID |
| S130004 |

| | |
|------------|------------|
| DUE DATE | ANNUAL FEE |
| 07/27/2001 | \$ 100 |

| |
|------------|
| AMOUNT DUE |
| \$ 100 |

| |
|---|
| <input type="checkbox"/> FEE NOT ENCLOSED |
|---|

Permittee requests
an inspection to close
out this permit.

| |
|-----------------------------|
| TAX ID OR SOCIAL SECURITY # |
| |

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

| | |
|-------------------|-----|
| Change of Address | |
| Contact | |
| Address | |
| State | Zip |
| Phone | |

RECEIVED
AUG 27 2001
DIVISION OF
OIL, GAS AND MINING

Please make check payable to:
Division of Oil, Gas and Mining